## L14000127792

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## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: <u>Coastal Kicks Soccer LLC</u> Name of Lir	nited Liability Company	
The er	nclosed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	satter to the following:	
	Michael Stauch	Name of Person	
		Firm/Company	
	457 Snapping Turtle Court West	Address	<del></del>
	Atlantic Beach, FL 32233	City/State and Zip Code	
ш	nichael@coastalkicks.com E-mail address: (to be use	d for future annual report notifice	ation)
For fu	rther information concerning this matter, ple	ase call:	
Micha	nel Stauch at (at (at (		lephone Number
	ted is a check for the following amount:  00 Filing Fee	Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Coastal Kicks Soccer LLC (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office.	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
457 Snapping Turtle Court West Atlantic Beach, FL 32233	457 Snapping Turtle Court West Atlantic Beach, FL 32233
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:
Michael Stauch	
Name	
457 Snapping Turtle Court Wes Florida street address (P.O. Box I	
Atlantic Beach	FL 32233 Zip
City	Zip
the place designated in this certificate, I hereby accept t capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r605, F.S
Registered Agent's Signatu	re (REQUIRED)
(CONTINUE)	D)
Page 1 of 2	· · · · · · · · · · · · · · · · · · ·

Fitle;	Name and Address:
AMBR" = Authorized Memb	
MGR" = Manager	
MGR	Michael Stauch
	457 Snapping Turtle Court West
	Atlantic Beach, FL 32233
<del></del>	
ctive date is listed, the date r	an the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 96
EV: Effective date, if other the ctive date is listed, the date if filing.)	nust be specific and cannot be more than five business days prior to or 90
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